

Arizona Department Of Juvenile Corrections
Procedure No.3000.26: Medical Health Services Quality Assurance Program
Effective: 06/14/04
Prior Issue: N/A

Purpose:

Arizona Department of Juvenile Corrections (ADJC) Medical and Behavioral Health Services Division ensures implementation of a Quality Assurance (QA) Program. The QA Program shall use a systematic approach to monitor, evaluate, and improve medical health care services to maintain established standards of quality of care for ADJC committed juveniles. National Commission on Correctional Health Care (NCCHC) standards shall apply to the practice of medical health services. These standards are a resource for assessment tools and the performance appraisal process. They shall be used in the QA Program to evaluate and improve care.

Rules:

1. **A QUALITY ASSURANCE COMMITTEE** shall be established at each secure facility Health Unit and shall be responsible for site specific quality improvement activities as summarized below, including but not necessarily limited to monitoring and reviewing:
 - a. The medical health care provided;
 - b. The process of care provision;
 - c. The care environment including communicable diseases;
 - d. Health care related grievances;
 - e. Deaths and other serious incidents, and
 - f. Data describing the types and quantity of care provided:
 - i. When problems are identified, **THE QUALITY ASSURANCE COMMITTEE** shall ensure that potential solutions are reviewed and that solution implementation is followed by review for successful outcome(s);
 - ii. **THE QUALITY ASSURANCE COMMITTEE** shall include representation from all health services disciplines represented at the facility and may include, as needed, representatives from non-medical health staff;
 - iii. **THE CORRECTIONAL REGISTERED NURSE SUPERVISOR (CRNS)** at each secure facility shall function as the Quality Assurance Committee Chairperson and shall be responsible to convene the committee as needed;
 - iv. **THE QUALITY ASSURANCE COMMITTEES** at each secure facility must meet at least quarterly.
2. Each facility **QUALITY ASSURANCE COMMITTEE** shall conduct the program review activities based upon the foundation of the following quality assurance initiatives:
 - a. Verification of licensure/certification credentials for all employed health care professionals (Procedure 3100.19);
 - b. Assessment of special medical examinations of juveniles, to include x-rays; consultations with offsite providers; hospitalizations; Emergency Room visits (Procedure 3100.16);
 - c. Ongoing/participation in peer reviews, juvenile mortality reviews, medical record reviews (Procedures 3000.20; 3100.17; 3000.06);
 - d. Review of training for staff (Procedure 3000.12);
 - e. Continuous review of Departmental Policies and Procedures to ensure staff awareness, understanding, and compliance (Procedure 3000.05);
 - f. **THE PHARMACY AND THERAPEUTICS COMMITTEE** shall review usage of medication within the agency medical health services program (Procedure 3100.11);
 - g. Review of juveniles' Health Care Report Cards (Procedure 3000.20) for their feedback regarding medical health services;
 - h. Completion of the monthly internal Health Unit Security Practices Audit by each specific facility medical Health Unit; and quarterly Health Unit Security Practices Audits of each facility

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medical Health Unit by another facility’s **HEALTH UNIT STAFF** on a rotating basis (Form 3000.26A).

- 3. **THE CORRECTIONAL REGISTERED NURSE SUPERVISOR (CRNS)** shall ensure that all facility Health Unit Quality Assurance Program documentation files are maintained in the Health Unit, organized individually by each of the eight primary QA initiatives delineated above.
- 4. **THE CORRECTIONAL REGISTERED NURSE SUPERVISOR (CRNS)** shall ensure that the monthly audits are submitted to the Program Administrator of Medical and Behavioral Health Services by the 15th working day of the following month.

Effective Date:	Approved by Process Owner:	Review Date:	Reviewed By:
	W. Dean Neitzke		